

**CLERK** Marilyn Kliber 231-723-3331 Fax 231-723-1492

## MANISTEE COUNTY BIRTH RECORD REQUEST

(Please Print)

Birth Name:	First	Middle	Last
Date of Birth:			
Place of Birth: (city/twp)	w		
Mother's Maiden Na	me: First	Middle	Last
Father's Name:	First	Middle	Last
(Check one)			
This is a req	uest for my birth	certificate.	
This is a req	uest for my child'	's birth certificate.	
Other:	advandadaman and an annual and an an an annual and an		//Acmata/
Requestor's Informa	tion:		
Name:			
Address:			
Telephone Number:			
Driver License Numb	er:		
SIGNATURE:		DAT	E:

<sup>\*\*</sup>PLEASE INCLUDE A COPY OF YOUR DRIVER'S LICENSE OR STATE I.D.\*\*

\* PLEASE MAKE CHECK OR MONEY ORDER PAYABLE TO MANISTEE COUNTY CLERK\* \*\$15.00 FOR 1<sup>ST</sup> COPY / \$5.00 FOR EACH ADDITIONAL COPY\*